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as a patient, my sensitiveness is not diminished. I had supposed the importance of this fact was more widely known than your note seems to indicate. It was on this account that the head waiter of a hotel told his waiters, "Put on your white dresses and look your prettiest, the butter's bad."

The letters to the editor from G. S. E. and Z. Y. X. reveal conditions due to the ignorance of the public and on which enlightenment can best come from nurses themselves through their various organizations. It would be easy to arrange for lectures before women's clubs, men's church clubs, parents' associations, village improvement societies, etc., which should set forth various aspects of the nursing profession. Some of these lectures should deal with the general subject of nursing, some with the special difficulties and needs of the profession, and once in a while a lecture on the humorous aspects of the nurse's life would make it possible to drive home some important truths.

The letter of Z. Y. X. about hospital conditions indicates to a business man that the responsible head of the institution, matron or superintendent, possibly trustees, is a person of inferior capacity, hired because he will accept small pay. An executive of large capacity would foresee the occurrence of such conditions and provide against them. A room too small for the nurse to do her work properly is too small to be occupied by a patient. It must be a very stupid, low-priced executive who would not see that an over-worked nurse would retard the recovery of her patient, and that this would react on the reputation of the hospital.

The demand that special nurses should work for less in a hospital than in private practice is to me another example of the workings of the low-priced mind. If the hardships of hospital work are greater than in private practice, why should not the hospital pay more? If we treat nurses like mill help we must expect the same mechanical quality of work from them.

In your advertising columns is an advertisement for a nurse for general duty at \$40, and in the adjoining column, one for a nurse to "take charge" for the same price. Is executive capacity worth nothing to the latter institution? Do the authorities really suppose they can get any one of ability or reliability at that price? Business men pay thousands of dollars a year to a man of executive capacity. Do hospital authorities think they can get it for nothing?

*Rutland Sanitarium.*

BAYARD E. HARRISON.

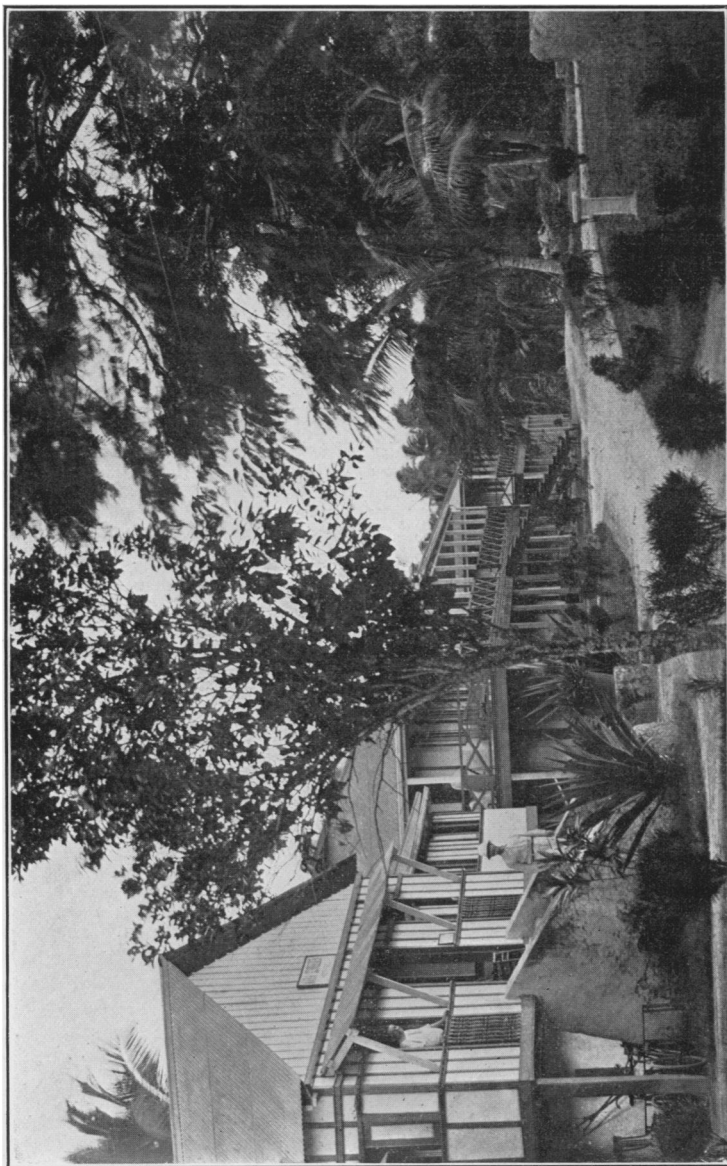
## LETTERS FROM NAVY NURSES

### I

DEAR EDITOR: One of the first lessons learned by the nurses who enter the Naval Nursing Service is dispatch in obeying immediate orders. The usual time allowed to prepare and depart is four days, but it is frequently necessary to insert the word "immediate." This was required when the nurses were sent to Guam.<sup>1</sup>

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<sup>1</sup>Guam is the largest island of the Ladrone or Mariana group in the Pacific Ocean, situated about 5000 miles from San Francisco and 1800 from the Philippine Islands. The island has an area of 200 square miles and a population of 9000. The islands were discovered by Magellan in 1521 and were then inhabited chiefly by Malaysian stock. In 1668 they were first "settled" by Spaniards, including Filipino and Mexicans, and with this influx the former "strong bodied, large limb'd well shap'd people" (described in 1668) changed and deteriorated physically. They are called Chamorros and their language is polyglot, Spanish roots predominating.



U. S. NAVAL HOSPITAL, AGANA, GUAM

The Chief Nurse was on leave, the two nurses who were to report with her were at distant stations, but these difficulties were trifles, and responding to "immediate orders," the same transport conveyed the little group to their new field of nursing.

Guam and its requirements were unknown quantities and as the days slipped by and the station was neared the hopes and anticipations became somewhat less bright and fears and apprehensions grew. The Navy does not coddle the nurses, however; they are rightly expected to work out their own salvation in regard to quarters, servants, subsistence, etc. In this new station, therefore, the condition demanded instant attention and in the adjusting and re-adjusting there was little time to dwell upon the strangeness of one's surroundings. When quarters were established, executive and nursing duties arranged, and hours planned, the station and surroundings had become familiar and the feeling of strangeness had vanished.

The hospital in Guam consists of three buildings, two connected by a porch and these two comprise the nurses' section. The buildings are large pavilions, two stories, surrounded by porches; the upper floor and porches for the patients, wards 90 x 25 ft., the lower floor being used for administrative offices and the dispensary.

We soon found that much of our work was to be among children in the treatment of the diseases peculiar to the islands. To systematize this work the island is divided into districts and the usual period of treatment given to a district is one week. The ward assigned for this work is the upper floor of one building. One of our nurses is in charge and is assisted by a native nurse and helped or hindered (according to her ability to manage), by several of the mothers who are allowed to remain. The ward has accommodation for thirty children, but frequently twice that number are admitted, and some management is required to arrange for this number and the accompanying mothers. The native nurses, six in number, are very gentle and willing, but absolutely indifferent to many things which seem extremely essential to us. However, we are not attempting any drastic changes, but have adopted a compromising policy which is proving beneficial to both sides. As a rule the native women accept and use our suggestions and improvements while we are learning how much good can be accomplished without the necessary equipment. "Diet time," however, with two diets served on one plate, placed on a bench, on opposite sides of which a child kneels and devours the food, and entire absence of tables and chairs, presents a somewhat distressing sight to us and we are all keen for some change, which will be suggested when we have "felt our way," a little longer.

The second building is given over to babies and children admitted with other diseases than those previously mentioned, and to the adult patients. The surgical work has not been entirely satisfactory to the medical officers, because of the inability of the native women to grasp the importance of asepsis. We have several cases of septicaemia, but they are responding most encouragingly to special nursing and the outlook in this branch of work is very hopeful from our point of view.

The cleaning is done by women of the village who work from 7 a.m. to 5 p.m., in the leisurely fashion peculiar to all tropical countries. We have learned not to expect too much from them and they are learning a different standard of cleanliness.

We are most comfortably quartered in an old mission house which we are making homelike, and we are accepting the fact that our subsistence may be as varied and the meals as good or bad, as is the temper of the various cooks that come and go. In the interim between work and play (which I will describe more particularly in my next letter), we are learning some necessary Chamorro words,

and are endeavoring to teach the native nurses and children some necessary English.

We inscribed our names in the visitor's book at the Palace, which is the act necessary to identify us with the American Colony. We had been courteously and kindly received as such, and this reception, together with our interesting work, absorbing the greater portion of our time, inspire the hope that we shall have a happy and satisfactory period of duty in the Island of Guam.

E. L.

#### TOO LATE FOR CLASSIFICATION

##### MISSOURI

The Missouri State Board for the Examination and Registration of Nurses will hold its annual meeting at Columbia, December 10 and 11, 1913. Fanny E. S. Smith, Secretary, 708 Providence Road, Columbia.